ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective ____8/1/08 (new) and 10/29/08 (Renewals) (3) (1) Annual Premium Percent Change (+ or -)** Volume (Illinois)* Coverage 1. Automobile Liability Private 1,465,516 Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 2.470.858 3. Liability Other Than Auto N/A N/A N/A 4. **Burglary and Theft** N/A N/A 5. Glass N/A 6. Fidelity N/A N/A N/A 7. Surety N/A N/A 8. Boiler and Machinery N/A N/A N/A 9. Fire N/A N/A 10. Extended Coverage N/A 11. Inland Marine N/A N/A 12. Homeowners N/A N/A N/A 13. Commercial Multi-Peril N/A 14. Crop Hail N/A 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We a revising our Personal Automobile Program manual to introduce a hybrid vehicle discount under Rule 18; and Rule 26. cash settlement option. In addition we are removing the additional towing charge from Rule 20. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. AIG Casualty Company

Name of Company

Timothy Carney, Casualty Manager
Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate level | produced by rate revision effective | |
|--|--|--|
| (1) <u>Coverage</u> | (2) Annual Premium <u>Volume (Illinois)*</u> | (3) Percent <u>Change (+ or -)**</u> |
| Automobile Liability Private | | |
| Passenger Commercial | 3,674,091 | +17.4 |
| Automobile Physical Damage | | |
| | 2,530,229 | +19.5 |
| Liability Other Than Auto | 2,330,229 | + 19.5 |
| 4. Burglary and Theft | | |
| F Close | | |
| C Fidelity | | |
| 7. Surety | | |
| | | |
| | | |
| 10. Extended Coverage 11. Inland Marine | | |
| 40 Hamasumana | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |
| Does filing only apply to certain territory (terr | itories) or certain classes? If so, specify: N | No |
| boos iming only apply to sortain territory (terr | | |
| Brief description of filing. (If filing follows rate | es of an advisory organization, specify organization | anization): |
| D. D. L. Adlinatus and | , , , , , , | |
| Dado Nato Adjustment | | |
| *Adjusted to reflect all prior rate changes. **Change in Company's premium level which | n will result from application of new rates. | |
| | AIG Agency Au | to - Al South Insurance Co. |
| | | ame of Company |
| | | |
| | Seth Sund | lell - Product Manager |
| | | Official Title |

FORM (RF-3) ESTIMATED

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective $\underline{07/14/2008}$.

| | (1 | (2) Annual Premium | (3) Percent |
|-----|---|---------------------------------------|----------------|
| | Coverage | <pre>Volume (Illinois Patriot)*</pre> | Change(+or-)** |
| 1. | Auto Liability Private Passenger Commercial | \$1,053,241 N/A | -2.53% N/A |
| 2. | Auto Physical Damage Private Passenger Commercial | \$254,388 N/A | +6.66% N/A |
| 3. | Liability Other Than Auto | N/A | N/A |
| 4. | Burglary & Theft | N/A | N/A |
| 5. | Glass | N/A | N/A |
| 6. | Fidelity | N/A | N/A |
| 7. | Surety | N/A | N/A |
| 8. | Boiler & Machinery | N/A | N/A |
| 9. | Fire | N/A | N/A |
| 10. | Extended Coverage | N/A | N/A |
| 11. | Inland Marine | N/A | N/A |
| 12. | Homeowners | N/A | N/A |
| 13. | Commercial Multi-Peril | N/A | N/A |
| 14. | Crop Hail | N/A | N/A |
| 15. | Other | N/A | N/A |
| | (Line of Insurance) | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories and all driver classes are affected.

Brief description of filing.(If filing follows the rates of an advisory organization's specify organization): Revised rate and rule filing.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American Service Insurance Company, Inc.
Name of Company

Christine Milewczyk, Compliance Specialist
Name Official Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premium or rate level produced by rate revision | |
|---|--|
| effective 10/01/2008 | |

| | Checure Totalizado | ·• | |
|------------|---------------------------------------|---------------------------------|-----------------------------------|
| | (1) | (2) Annual Premium | (3) Percent |
| | Coverage | Volume (Illinois) * | Change (+or-) ** |
| 1. | Automobile Liability Private | | |
| | Passenger | 1,811,000 | +5.5% |
| | Commercial | | |
| 2 | Automobile Physical Damag | | |
| | Private Passenger | 1,600,000 | +5.5% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| J. 10. | Extended Coverage | | |
| 10. 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 13. 14. | | | |
| | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |
| • | Does filing only apply to certa | in territory (territories) or (| certain |
| | Classes? If so, | in termory (termorios) or t | , o. (a.) |
| | | PD. Coll., Comp. Territories. | : 12, 13, 18, 20, 37, 38, 39, 40, |
| | | & UIM Territories 12, 13, 26, 3 | |
| | Brief description of filing. (If fi | | |
| | Organization, specify | ling follows rates of arrad | Visory |
| | organization): | BLPD Med Comp C | oll., +5.5%, UM & Uim +5%, |
| | Towing Option- increase of \$4 to \$8 | | |
| | Towing Option- increase of \$4 to \$6 | 5, Extended Transportation in | ici cade to 420 |
| | *Adjusted to reflect all prior ra | te changes | |
| | **Change in Company's prem | ium level which will result | from application of new |
| | rates. | idi.i ididi ittildi ittil idda. | |
| | iales. | Badger Mutual Insu | rance Company |
| | | | ne of Company |

Name of Company

Terry Falls - Workers' Compensation Coordinator

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

| Change in Company's premium or rate level produced by rate revision | 1 |
|---|---|
| effective 07/15/2008 | |

| | (1) | (2) | (3) |
|----|--|---|------------------------------|
| - | () | Annual Premium | Percent |
| • | Coverage | Volume (Illinois) * | Change (+or-) ** |
| | Automobile Liability Private | | |
| | Passenger | 976,417 | + 13.85 |
| | Commercial | | |
| | Automobile Physical Damag | | |
| | Private Passenger | 981,201 | + 14.44 |
| | Commercial | | |
| | Liability Other Than Auto | | |
| | Burglary and Theft | | |
| | Glass | | |
| | Fidelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| | Fire | | |
|). | Extended Coverage | | |
| ١. | Inland Marine | | |
| 2. | Homeowners | | |
| 3. | Commercial Multi-Peril | | |
| 1. | Crop Hail | | |
| 5. | Other | | |
| | Life of Insurance | | |
| • | Does filing only apply to certai | n territory (territories) or | certain |
| | Classes? If so, | | |
| | specify: No No | | |
| | | | |
| | Brief description of filing. (If fil | ling follows rates of an a | dvisory |
| | Organization, specify | | |
| | organization): | | Scoring factors, decrease in |
| | 100/300 limit factor and decrease in | Trailer rates | |
| | | | |
| | *Adjusted to reflect all prior rat **Change in Company's premi | te changes. ium level which will resul | It from application of new |
| | rates. | | |
| | | | ers Insurance USA, Inc. |
| | | | me of Company |
| | | Anne Roqu | |
| | | | Official – Title |

| | (1) | (2) | (3) |
|---|--|---|--|
| | (1) | Annual Premium | Percent Change |
| | Coverage | Volume (Illinois)* | (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | 7,415,634 | 0.0% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | 3,734,066 | 0.0% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | 10 | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 10. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | And wife. | |
| | | | |
| 14. | Crop Hail | | |
| 15. | Worker's Compensation | | |
| 16. | Other | | |
| | Line of Insurance | | |
| es filin | g only apply to certain territory (territories | s) or certain classes? If so, specify: | The revision applies |
| all territ | ories. | | |
| | | | |
| | ription of filing. (If filing follows rates of | f an advisory organization, specify | organization): |
| rief desc | ription of filing. (If filing follows rates of filing, we are revising territories, expanding | f an advisory organization, specify on price symbols for high value veh | organization): icles, rolling up model |
| ief desc | filing, we are revising territories, expanding | ng price symbols for high value veh | icles, rolling up model |
| ief desc ith this ars, dec | filing, we are revising territories, expanding reasing rates for high performance vehicles | ng price symbols for high value veh | icles, rolling up model |
| ief desc ith this ars, dec | filing, we are revising territories, expanding | ng price symbols for high value veh | icles, rolling up model |
| ief desc ith this ars, dec married | filing, we are revising territories, expanding reasing rates for high performance vehicles | ng price symbols for high value veh | icles, rolling up model |
| ief desc ith this ars, dec married | filing, we are revising territories, expanding reasing rates for high performance vehicle occasional youth classifications. | ng price symbols for high value veh | icles, rolling up model |
| ief desc ith this ars, dec married Adjusted Change | filing, we are revising territories, expanding reasing rates for high performance vehicle occasional youth classifications. to reflect all prior rate changes. | ng price symbols for high value veh | icles, rolling up model |
| ief desc ith this ars, dec married Adjusted Change | filing, we are revising territories, expanding reasing rates for high performance vehicle occasional youth classifications. to reflect all prior rate changes. in Company's premium level which | ng price symbols for high value veles and correcting an overlap for prin | icles, rolling up model |
| ief desc ith this ars, dec married Adjusted Change | filing, we are revising territories, expanding reasing rates for high performance vehicle occasional youth classifications. to reflect all prior rate changes. in Company's premium level which | ng price symbols for high value vehes and correcting an overlap for prin | icles, rolling up model |
| ief desc ith this ars, dec married Adjusted Change | filing, we are revising territories, expanding reasing rates for high performance vehicle occasional youth classifications. to reflect all prior rate changes. in Company's premium level which | es and correcting an overlap for prin COUNTRY Casualty Insurance Name of Company | icles, rolling up model |
| ief desc ith this ars, dec married Adjusted Change | filing, we are revising territories, expanding reasing rates for high performance vehicle occasional youth classifications. to reflect all prior rate changes. in Company's premium level which | COUNTRY Casualty Insurance Name of Company Relace A South | icles, rolling up model |
| ief desc ith this ars, dec married adjusted Change | filing, we are revising territories, expanding reasing rates for high performance vehicle occasional youth classifications. to reflect all prior rate changes. in Company's premium level which | es and correcting an overlap for prin COUNTRY Casualty Insurance Name of Company | icles, rolling up model ncipal youth and Company |

| | (1) | (2) | (3) |
|-----------|--|--|---|
| | (1) | (2) Annual Premium | Percent Change |
| | Coverage | Volume (Illinois)* | (+ or -)** |
| 1. | Automobile Liability | | |
| 1. | Private Passenger | 141,246,848 | 0.0% |
| | Commercial | 111,210,010 | |
| 2. | Automobile Physical Damage | | |
| 2. | Private Passenger | 112,018,522 | 0.0% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 5. 6. | Fidelity | | |
| 7. | Surety | | |
| 7. 8. | Boiler and Machinery | | |
| o. 9. | Fire | | |
| 9. 10. | Extended Coverage | | |
| 10. | Inland Marine | | |
| | | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Worker's Compensation | | |
| 16. | Other | | |
| | Line of Insurance | | |
| | g only apply to certain territory (territorie | s) or certain classes? If so, speci | fy: The revision applies |
| all terri | tories. | | |
| rief desc | ription of filing. (If filing follows rates o filing, we are revising territories, expandi | f an advisory organization, speci | fy organization): vehicles, rolling up model |
| are dec | reasing rates for high performance vehicle | es and correcting an overlan for r | principal youth and |
| | occasional youth classifications. | es and correcting an overlap for p | morpai youn una |
| Illaliico | occasional youth classifications. | | |
| Adiusted | to reflect all prior rate changes. | | |
| | in Company's premium level which | | |
| CHange | ult from application of new rates. | · | |
| | un from application of new fates. | | |
| | un from application of new rates. | COUNTRY Mutual Insurance | Company |
| | uit from application of new rates. | COUNTRY Mutual Insurance Name of Company | e Company |
| | uit from application of new rates. | | |
| | unt from application of new rates. | Name of Company Research A South | |
| | uit from application of new rates. | Name of Company | 2 |

| | (1) | (2) Annual Premium | (3) Percent Change |
|------------|---|--|--------------------------|
| | Coverage | Volume (Illinois)* | (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | 97,304,291 | 0.0% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | 70,127,938 | 0.0% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Worker's Compensation | | |
| 16. | Other | | |
| | Line of Insurance | | |
| | | | |
| | g only apply to certain territory (territorie | s) or certain classes? If so, specify: | The revision applie |
| ıll territ | tories. | | |
| ief desc | ription of filing. (If filing follows rates o | f an advisory organization, specify | organization): |
| th this | filing, we are revising territories, expandi | ng price symbols for high value veh | nicles, rolling up model |
| ars, dec | reasing rates for high performance vehicl | es and correcting an overlap for prin | ncipal youth and |
| | occasional youth classifications. | | |
| | | | |
| djusted | to reflect all prior rate changes. | | |
| | in Company's premium level which | | |
| will res | ult from application of new rates. | | |
| | | COUNTRY Preferred Insurance | Company |
| | | Name of Company | |
| | | Ocharl a South | |
| | | Richard A. Smith | |
| | | Chief Property/Casualty Actuary | у |
| | | Official and Title | |

SUMMARY SHEET

This filing is for a new company. Effective Date: <u>July 31, 2008</u>

| | (1) Coverage | (2) Average Premium Volume (Illinois)* | (3) Percent Change (+ or -) ** |
|-----|----------------------------|--|--------------------------------|
| l. | Automobile Liability | | |
| k | Private Passenger | <u>\$111,909</u> | 0.04% |
| | * Commercial | | |
| 2. | Automobile Physical Damage | | |
| | * Private Passenger | \$ 81,717 | - 04.3% |
| | * Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 5. | Fidelity | | |
| 7. | Surety | | |
| 3. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other (Lines of Ins.) | | |

Brief description of filing. (If filing follows rate of an advisory organization, specify organization (s).)

Balboa Insurance Company proposes with this filing to introduce vehicle symbols for model year 2008.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Countrywide Insurance Group
Name of Company

Todd Eckert- Illinois Product Manager Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

| 7/21/081 | leur |
|----------|---------|
| | Renewal |

| | (1) | (2) | (3) |
|---------|--|---|--------------------------|
| | Coverage | Annual Premium Volume (Illinois)* | Percent Change (+or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | \$627,258 | 6.2% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | 0.50 |
| | Private Passenger | \$538,073 | 0.7% |
| _ | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| _ | | | |
| | | rritories) or certain classes? If so, specify | : |
| Filing | affects all areas of state. | | |
| | | | |
| Brief d | escription of filing. (If filing follows | rates of an advisory organization, specify | organization): |
| Change | ed source of credit scores. Adjusted b | ase rates. | |

- * Adjusted to reflect all prior rate changes.

 ** Change in Company's premium level which will result from application of new rates.

Garrison Property & Casualty Insurance Company
Name of Company

Layne Roetzel, Assistant Vice President, Insurance Compliance Official - Title

SUMMARY SHEET Form (RF-3)

| | Change in Company's premium effective: September 8, 2008 | or rate level produced by rate revisi | on |
|-----------|---|--|--|
| | (1) | (2) Annual Premium | (3) Percent |
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | 827,356 | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | 559,600 | 5.50% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other: | | |
| | Line of Insurance | • | |
| | es filing only apply to certain territ o, specify: | ory(ies) or certain classes? No | |
| org We | ef description of filing. (If filing fol panization, specify organization): are revising our base rates, mode are also making miscellaneous of a overall effect of this change is e | lel year, Auto/Home Discount and P | rime of Life Discount. territorial revisions. |
| | | | |
| * | Estimated annual premium for a Change in Company's rate adec new rates. | all companies quacy level which will result from ap | plication of |
| | | Meridian Security I | nsurance Company |
| | | | Company |
| | | Stacey J. Bitler. | Associate Actuary |
| | | | ıl - Title |

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective $\frac{7}{31}/2008 \text{ NB}$; $\frac{10}{04}/2008 \text{ RB}$.

| (1) | (2) | (3) Percent |
|--|---|-------------------|
| Coverage | Annual Premium Volume (Illinois)* | Change (+ or -)** |
| | 701dilo (11111111) | |
| 1. Automobile Liability | 22 246 162 | +4.8% |
| Private Passenger | 33,346,162 | |
| Commercial | | |
| 2. Automobile Physical Damage | 21,566,849 | +2.1% |
| Private Passenger | 21,300,049 | |
| Commercial | _ | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | _ | |
| Does filing only apply to certain If so, specify: No | territory (territories)or | certain classes? |
| | | |
| Brief description of filing. (If organization, specify organization | filing follows rates of an): Base rate revision | n advisory |
| | | |
| | | |
| | | |
| * Adjusted to reflect all prior: ** Change in Company's premium le result from application of new | vel which will | |
| | Metropolitan Casualty Ins | urance Company |
| | Name of Compa | |
| | | - |
| _ | Martin Deede - Vice F | |
| | Official - Tit | :le |

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective $\frac{7}{31}/2008$ NB; $\frac{10}{04}/2008$ RB .

| (1) | (2) | (3) Percent | | |
|---|---|--------------------------------|--|--|
| Coverage | Annual Premium Volume (Illinois)* | Change (+ or -)** | | |
| 1. Automobile Liability | | | | |
| Private Passenger | 9,605,307 | +5.2% | | |
| Commercial | | | | |
| 2. Automobile Physical Damage | | 0.00 | | |
| Private Passenger | 7,730,685 | -0.9% | | |
| Commercial | | | | |
| 3. Liability Other Than Auto | | | | |
| 4. Burglary and Theft | | | | |
| 5. Glass | | | | |
| 6. Fidelity | | | | |
| 7. Surety | | | | |
| 8. Boiler and Machinery | | | | |
| 9. Fire | | | | |
| 10. Extended Coverage | | | | |
| 11. Inland Marine | | | | |
| 12. Homeowners | | | | |
| 13. Commercial Multi-Peril | | | | |
| 14. Crop Hail | | | | |
| Line of Insurance | | | | |
| Does filing only apply to certain territory (territories)or certain classes? If so, specify: No | | | | |
| Brief description of filing. (If organization, specify organization | | n advisory | | |
| * Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new | vel which will | | | |
| Metropoli | tan Group Property and Cas Name of Compa | sualty Insurance Company ny | | |
| | Mantin Dania III as F | na ai domb | | |
| | Martin Deede - Vice F | | | |

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 09-01-2008

| | (1) | (2) | (3) |
|----------|--|------------------------|---|
| | • • | Annual Premium | Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private | | |
| | Passenger | \$591,477 | 4.00% |
| | Commercial | | 0.00% |
| 2. | Automobile Physical Damage Private Passenger | | 0.00% |
| | Commercial | | 0.00% |
| 3. | Liability Other Than Auto | | 0.00% |
| 4. | Burglary and Theft | | 0.00% |
| 5. | Glass | | 0.00% |
| 6. | Fidelity | | 0.00% |
| 7. | Surety | | 0.00% |
| 8. | Boiler and Machinery | | 0.00% |
| 9. | Fire | | 0.00% |
| ٥. | Extended Coverage | | 0.00% |
| 1. | Inland Marine | | 0.00% |
| 2. 3. | Homeowners | | 0.00% |
| 3. | Commercial Multi-Peril | | 0.00% |
| 4. | Crop Hail | | 0.00% |
| 5. | Other | | 0.00% |
| | Life of Insurance | | |
| | Does filing only apply to cert classes? If so, specify: This | | |
| | | | |
| | Brief description of filing. organization, specify organiza | (If filing follows rat | es of an advisory rease for Personal Auto liability. |
| | The overall impact is expected to be 2.1%. | | |

Midwest Family Mutual Insurance Company

Name of Company

Heather Sams, R&D Analyst
Official--Title

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

Section 754.Exhibit A Summary Sheet (Form RF-3)

Form (RF-3) SUMMARY SHEET

| | Change in Company's premium of effective: September 8, 2008 | or rate level produced by rate revision | <u>.</u> |
|-----------|---|--|-------------------|
| | (1) | (2) Annual Premium | (3) Percent |
| | <u>Coverage</u> | Volume (Illinois)* | Change (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | 468,876 | 2.10% |
| _ | Commercial | | |
| 2. | Automobile Physical Damage Private Passenger | 363,291 | 0% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. 10 | Fire Extended Coverage | | |
| | Inland Marine | | |
| | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other: | 4-37-01-1 | |
| | Line of Insurance | | |
| | es filing only apply to certain territo o, specify: | ory(ies) or certain classes? No | |
| org We | ef description of filing. (If filing following anization, specify organization): are revising our base rates, mode are also making miscellaneous common and the coverall effect of this change is es | l year, Auto/Home Discount and Prime of hanges to our manual. | Life Discount. |
| | Adjusted to reflect all prior rate c | hanges | _ |
| ** | Change in Company's rate adeq new rates. | uacy level which will result from application | on of |
| | | State Automobile Mutual Ins | |
| | | Name of Comp | any |
| | | Stacey J. Bitler, Associ | iate Actuany |
| | | Official - Title | |
| | | | |

Section 754.Exhibit A Summary Sheet (Form RF-3)

Form (RF-3) SUMMARY SHEET

| | Change in Company's premium o effective: September 8, 2008 | r rate level produced by rate revision | |
|----------|---|--|--------------------------|
| | (1) | (2) Annual Premium | (3) Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| | Private Passenger | 1,917,578 | 2.10% |
| _ | Commercial | | |
| 2. | Automobile Physical Damage | 1,660,291 | 0% |
| | Private Passenger Commercial | 1,000,291 | 070 |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | ····· |
| 9. 10 | Fire Extended Coverage | - | |
| | Inland Marine | | |
| | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| | Crop Hail | | |
| 15. | Other: | | |
| | Line of Insurance | | |
| Doe | es filing only apply to certain territo | ry(ies) or certain classes? No | |
| If s | o, specify: | | |
| | | | |
| | | | |
| Brie | ef description of filing. (If filing follo | ws rates of an advisory | |
| org | anization, specify organization): | | |
| | | I year, Auto/Home Discount and Prime of | Life Discount. |
| | are also making miscellaneous ch | | |
| The | overall effect of this change is est Adjusted to reflect all prior rate ch | | |
| ** | , | lariges lacy level which will result from application | n of |
| | new rates. | ady 10101 Which will result from application | |
| | | State Auto Property & Casualty | |
| | | Name of Comp | any |
| | | Stacey J. Bitler, Associ | ate Actuary |
| | | Official - Title | |

ILLINOIS

SUMMARY SHEET (Form RF-3)

| Change in Company's premium or rate level pr | August 25, 2008 | |
|---|---|---------------------|
| (1) | (2) Estimated | (3) |
| | Annual Premium | Percent |
| <u>Coverage</u> | Volume (Illinois)* | Change (+ or -)** |
| 1. Automobile Liability | | |
| Private Passenger | \$54,288,876 | 5.9% |
| Commercial | \$2,288,894 | 0.0% |
| 2. Automobile Physical Damage | | |
| Private Passenger | \$41,784,632 | 0.0% |
| Commercial | \$1,502,672 | 0.0% |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | - 44 7/49 | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | - | |
| Does filing only apply to certain territory (terri N/A | tories) or certain classes? If so, spec | cify: |
| Brief description of filing. (If filing follows ra Revised BIPD base rates for the auto program. | | cify organization): |
| | | |
| | | |
| * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which | will result from application of new | rates. |
| STATE FARM FIRE | E AND CASUALTY COMPANY | |
| Na | me of Company | |
| STEVE HARR, ACTUARY AN | D ASSISTANT SECRETARY-TRE | ASURER |

ILLINOIS

SUMMARY SHEET (Form RF-3)

| Change in Company's premium or rate level produc | August 25, 2008 | |
|--|-------------------------------------|--------------------------|
| (1) | (2) Estimated | (3) |
| | Annual Premium | Percent |
| Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. Automobile Liability | | |
| Private Passenger | \$841,746,348 | 5.6% |
| Commercial | \$28,343,600 | 0.0% |
| 2. Automobile Physical Damage | | |
| Private Passenger | <u>\$711,056,536</u> | 0.0% |
| Commercial | \$28,558,096 | 0.0% |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |
| Does filing only apply to certain territory (territorie N/A | es) or certain classes? If so, spec | cify: |
| Brief description of filing. (If filing follows rates o Revised BIPD base rates for the auto program. | of an advisory organization, spec | cify organization): |
| | | |
| | | |
| * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will | l result from application of new | rates. |
| STATE FARM MUTUAL AUTO | | PANY |
| Name o | of Company | |
| STEVE HARR, ACTUARY AND AS | SSISTANT SECRETARY-TRE | EASURER |
| | ial - Title | |

SUMMARY SHEET

7/21/08 New 08/27/2008 Renewal

Change in Company's premium or rate level produced by rate revision effective

| | (1) <u>Coverage</u> | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+or -)** | | |
|-------|--|--|------------------------------|--|--|
| 1. | Automobile Liability Private Passenger Commercial | \$24,261,463 | 12.0% | | |
| 2. | Automobile Physical Damage Private Passenger Commercial | \$20,207,675 | 7.4% | | |
| 3. | Liability Other Than Auto | | | | |
| 4. | Burglary and Theft | | | | |
| 5. | Glass | | | | |
| 6. | Fidelity | | | | |
| 7. | Surety | | | | |
| 8. | Boiler and Machinery | | | | |
| 9. | Fire | | | | |
| 10. | Extended Coverage | | | | |
| 11. | Inland Marine | | | | |
| 12. | Homeowners | | | | |
| 13. | Commercial Multi-Peril | | | | |
| 14. | Crop Hail | | | | |
| 15. | Other | | | | |
| | Line of Insurance | | | | |
| | iling only apply to certain territory (terr affects all areas of state. | itories) or certain classes? If so, specify: | | | |
| | 0.2 | | | | |
| | lescription of filing. (If filing follows reed source of credit scores. Adjusted ba | ates of an advisory organization, specify of se rates. | organization): | | |
| ** Cl | * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will result from application of new rates. | | | | |

United Services Automobile

Association
Name of Company

- -

Layne Roetzel, Assistant Vice President, Insurance Compliance Official - Title

SUMMARY SHEET Form (RF-3)

| Change i | n Company's premium or rate level p | roduced by rate revision effective | 8/15/08 for New Business 10/15/08 for Renewals |
|------------|--|---------------------------------------|---|
| | (1) | (2) Annual Premium | (3) Percent |
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1 | Automobile Liability | | |
| | Private Passenger | \$29,074,276 | 0.39% |
| | Commercial | | |
| 2 | Automobile Physical Damage | | |
| | Private Passenger Commercial | <u>\$18,592,752</u> | 0.00% |
| 3 | Liability Other Than Auto | | |
| 4 | Burglary and Theft | | |
| 5 | Glass | | |
| 6 | Fidelity | | |
| 7 | Surety | | |
| 8 | Boiler and Machinery | | |
| 9 | Fire | | |
| 10 | Extended Coverage | | |
| 11 | Inland Marine | • | |
| 12 | Homeowners | | |
| 13 | Commercial Multi-Peril | | |
| 14 | Crop Hail | | |
| 15 | Other | | |
| | | | |
| Does filin | ng only apply to certain territory (territo | ories or certain classes? If so, spec | ify: |
| 4 | 1+ | | |
| No // | letro program | | |
| Brief des | scription of filing. (If filing follows rate | s of an advisory organization, speci | fy organization): |
| Increas | e in UM base rate. | | |
| | | | |

Universal Casualty Company Name of Company

Kent Lang - Underwriting V.P.
Official - Title

^{*} Adjusted to reflect all prior rate changes
** Change in Company's premium level which will result from application of new rates.

SUMMARY SHEET Form (RF-3)

| (1) (2) (3) Annual Premium Percent Coverage Volume (Illinois)* Change (+ or -)* 1 Automobile Liability Private Passenger \$5.099.600 0.14% | ss |
|--|--------|
| <u>Coverage</u> <u>Volume (Illinois)*</u> <u>Change (+ or -)*</u> 1 Automobile Liability | |
| | * - |
| Drivete Descender 65 000 600 0 440/ | |
| Private Passenger \$5,099,600 0.14% | |
| Commercial | |
| 2 Automobile Physical Damage | |
| Private Passenger \$1,421,008 0.00% | |
| Commercial | |
| 3 Liability Other Than Auto | |
| 4 Burglary and Theft | |
| 5 Glass | |
| 6 Fidelity | |
| 7 Surety | |
| 8 Boiler and Machinery | |
| 9 Fire | |
| 10 Extended Coverage | |
| 11 Inland Marine | |
| 12 Homeowners | |
| 13 Commercial Multi-Peril | |
| 14 Crop Hail | |
| 15 Other | |
| Does filing only apply to certain territory (territories or certain classes? If so, specify: | |
| No Downstate grogien | |
| Brief description of filing. (If filing follows rates of an advisory organization, specify organization): | |
| Increase in UM base rate. | |

- * Adjusted to reflect all prior rate changes
 ** Change in Company's premium level which will result from application of new rates.

Universal Casualty Company

Name of Company

Kent Lang - Underwriting V.P.
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

7/21/08 new 08/27/2008 Renewal

| | (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+or -)** |
|----------|---|---|------------------------------|
| 1. | Automobile Liability | | |
| 1. | Private Passenger Commercial | \$18,631,618 | 11.5% |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | \$15,498,652 | 5.6% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| | ling only apply to certain territory (ter | rritories) or certain classes? If so, specify | : |
| | | | |
| Brief de | escription of filing. (If filing follows | rates of an advisory organization, specify | organization): |
| | ed source of credit scores. Adjusted b | | |

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

USAA CASUALTY INSURANCE COMPANY

Name of Company

Layne Roetzel, Assistant Vice President, Insurance Compliance Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

| 1 | , | |
|---------|-------------|---|
| ปาป | 08 new | |
| 11011 | 008 Renewa | П |
| 08/27/2 | 008 Kexeura | ľ |

| | (1) | (2) | (3) |
|---------|--|--|--|
| | Coverage | Annual Premium Volume (Illinois)* | Percent Change (+or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | \$1,470,905 | 0.0% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | \$1,565,271 | 0.0% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| Does f | iling only apply to certain territory (t | erritories) or certain classes? If so, spe | rify. |
| | affects all areas of state. | of the control of the | |
| Imme | , and an | | |
| Brief / | lescription of filing (If filing follow | s rates of an advisory organization, spe | cify organization): |
| | ed course of credit scores. Adjusted | | ong organization). |

- * Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

USAA GENERAL INDEMNITY COMPANY

Name of Company

Layne Roetzel, Assistant Vice President, Insurance Compliance Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

| Cha | ange in Company's premium or rate l | evel produced by rate revision effective | 7/28/08 |
|-----------|--|--|---|
| | (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
| | OOVERAGE | Volume (minolog | Ondingo (* O.) |
| 1. | Automobile Liability Private Passenger Commercial | \$3,161,415 | +3.6% |
| 2. | Automobile Physical Damage Private Passenger Commercial | | 0.0% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| | | (territories) or certain classes? If so, specify | |
| Brie | ef description of filing. (If filing follows | rates of an advisory organization, specify of | organization): With this revision we wil |
| <u>be</u> | changing base rates, agms factors | excess vehicle factors, territory allignme | ent, territory factors, discount factors |
| age | multicar adjustment factors, venicle | driver factors, symbol factors, model year | Tactors, points Tactors, and deductible |
| tact | ors. I nese changes will be to both of | ur our new business products (Viking Month | iy and viking Six Month) |
| | | | |
| | | | |
| | justed to reflect all prior rate changes hange in Company's premium level v | s. vhich will result from application of new rate | 5. |
| | | Vertical form | and Company of Microscia |
| | | VIKING Insura | ance Company of Wisconsin Name of Company |
| | | | Name of Company |
| | | Paine D | schler - Product Analyst |
| | | raige D | Official – Title |
| | | | |